Image# 11930172550 FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)										
Joe Walsh										
(b) Address (number and street)	☐ Check if address changed					2. Identification Number				
2210 Woodlawn Park Ave.					F	101L0809	0			
(c) City, State and ZIP Code						s This Statemen	t X New		ended	
McHenry	IL.		60051				(11)	OR (A)		
4. Party Affiliation	5. Office Soug	ht		6. State &		of Candid	ate			
REPUBLICAN PARTY	House			IL	80					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I hereby designate the following named political committee as my Principal Campaign Committee for the (year of election) election(s).										
NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full)										
JOE WALSH FOR CONGRE	SS COMMITTE	EE, INC.								
(b) Address (number and street)										
830 W. ROUTE 22 -BOX 56										
(c) City, State and ZIP Code										
LAKE ZURICH	IL		60	0047						
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.										
NOTE: This designation should be filed with the principal campaign committee.										
(a) Name of Committee (in full)										
IL-08 CONGRESSIONAL VICTORY COMMITTEE										
(b) Address (number and street)										
264 N. Lumpkin St #202										
(c) City, State and ZIP Code										
Athens	G.	A	30	0601						
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.										
Signature of Candidate						Date				
Joe Walsh						01/24/2011				
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C.§437g.										
			-							

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

ILLINOIS HOUSE REPUBLICAN FRESHMEN

(b) Address (number and street) PO BOX 2719

(c) City, State and ZIP Code

WASHINGTON 20013